Fill in this information to identify your case:					
Debtor 1	<b>Melinda</b> First Name	<b>D.</b> Middle Name	Henderson Last Name	Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	—   <b>I</b>	An amended filing
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF TEXAS		<b>I</b>	A supplement showing postpetition chapter 13 income as of the following date
Case number (if known)	16-30622-13				09/10/2018 MM / DD / YYYY

#### Official Form 106I

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe Em	pioyment
. Fill in yo	our employment	

•	Fill in your employment information.		Debtor 1		Debtor 2 or non	-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status  Occupation	<ul><li>✓ Employed</li><li>✓ Not employe</li><li>Supply Chain S</li></ul>		✓ Employed ☐ Not employ	ed
	Include part-time, seasonal, or self-employed work.	Employer's name	Ratheon	pecialist	Bostik	
	Occupation may include student or homemaker, if it	Employer's address	1200 Jupiter Number Street		Number Street	
	applies.				Dallas, TX	
			Garland	TX 75042		
			City	State Zip Code	City	State Zip Code
		How long employed to	here? 27 Years	5	9 Month	S

# Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

5. For Debtor 1 For Debtor 2 or non-filling spouse

2. \$5,962.83 \$5,372.69

Official Form 106l Schedule I: Your Income page 1

Deb	loi i	Melinda D. Henderson		Case num	ber	(if know	/n) <u>16</u> -	-306	522-13
				For Debtor 1		or Debto on-filing	or 2 or 3 spouse	<del>)</del>	
	Cop	by line 4 here	4.	\$5,962.83	_		72.69	_	
5.	List	all payroll deductions:							
		Tax, Medicare, and Social Security deductions	5a.	\$1,129.10		\$1,1	11.49		
		Mandatory contributions for retirement plans	5b.	\$0.00			\$0.00		
		Voluntary contributions for retirement plans	5c.	\$238.52		\$2	68.64		
		Required repayments of retirement fund loans	5d.	\$201.05			\$0.00		
		Insurance	5e.	\$684.66		\$	46.65		
	5f.	Domestic support obligations	5f.	\$0.00			\$0.00		
		Union dues	5g.	\$0.00			\$0.00		
	•	Other deductions. Specify:	5h.•		•		\$0.00		
6.	Add	I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$2,253.33			26.78		
7.	-	- 5h.  culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,709.50			45.91		
8.		all other income regularly received:			•	Ψ0,0	10.01		
0.		Net income from rental property and from operating a	8a.	\$0.00			\$0.00		
	oa.	business, profession, or farm	oa.	φυ.υυ_			φυ.υυ		
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00			\$0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			\$0.00		
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00			\$0.00		
	8e.	Social Security	8e.	\$0.00			\$0.00		
	8f.	Other government assistance that you regularly receive			•				
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$0.00			\$0.00		
	8g.	Pension or retirement income	- 8g.	\$0.00			\$0.00		
	8h.	Other monthly income.	•	<del> </del>	•		<u> </u>		
		Specify:	8h.	+ <u>\$0.00</u>			\$0.00		
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00			\$0.00		
10.	Cald	culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,709.50	٠,	\$3,9	45.91	]=[	\$7,655.41
11		te all other regular contributions to the expenses that you list in S	chadi	ا مار				_	
•••	Inclu	ude contributions from an unmarried partner, members of your househids or relatives.	iold, y	our dependents, you			•		
	Dor	not include any amounts already included in lines 2-10 or amounts tha	t are i	not available to pay e	xpe	nses list	ted in Sc	hed	ule J.
	Spe	cify:					_ 11.	+	\$0.00
12.	inco	I the amount in the last column of line 10 to the amount in line 11. ome. Write that amount on the Summary of Your Assets and Liabilities applies.					12.		\$7,655.41 Combined monthly income
13.	Do	you expect an increase or decrease within the year after you file t	his fo	rm?					
	$\checkmark$	No. None.							
		Yes. Explain:							

G	ill in this inforr	nation to iden	tify your case:			Oh.	1. : 6 41. :	_ :	
	Debtor 1	Melinda	D.	Hende	erson		ck if this	s is: ended filing	
	Debior 1	First Name	Middle Name	Last Na			A supp	plement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me	-	followi	er 13 expenses a ng date:	s or the
	United States Bank	cruptcy Court for the	ne: NORTHERN D	ISTRICT OF	TEXAS		09/10/	<b>/2018</b> DD / YYYY	<u> </u>
	Case number (if known)	16-30622-13	·				IVIIVI / L	77111	
0	fficial Form 10	06J				_			
S	chedule J: Yo	 our Expens	es						12/15
na	rrect information. me and case numb	If more space is	ible. If two married p needed, attach anoth nswer every question sehold	er sheet to t					
1.	Is this a joint cas	se?							
2.	No	Debtor 2 live in a  bes. Debtor 2 must  bendents?	separate household file Official Form 106.  No	J-2, Expenses	s for Separate House  Dependent's relat			2.  Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this in for each dependen		Debtor 1 or Debto			age	live with you?
	Do not state the d	dependents'			Son			20	Yes No
	names.								Yes
									□ No - □ Yes
									No No
									Yes No
					-				Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes						
G	Part 2: Estim	ate Your Ong	oing Monthly Exp	enses					
to		s of a date after t	nkruptcy filing date u he bankruptcy is filed	-	-			•	
			ash government assis on Schedule I: Your l					Your expens	es
4.			penses for your residud any rent for the grou					4.	\$1,058.00
	If not included in	line 4:							
	4a. Real estate t	taxes						4a	
	4b. Property, hor	meowner's, or ren	ter's insurance					4b	
	4c. Home mainte	enance, repair, ar	d upkeep expenses					4c	\$120.00
	4d. Homeowner'	s association or c	ondominium dues					4d.	

Debtor 1	Melinda D. Henderson	Case number (if known)	16-30622-13
		Your e	expenses
. Addi	tional mortgage payments for your residence, such as home equity loans	5	
6. Utilit	ies:		
6a.	Electricity, heat, natural gas	6a	\$380.00
6b.	Water, sewer, garbage collection	6b	\$95.00
	Telephone, cell phone, Internet, satellite, and cable services	6c	\$560.00
6d.	Other. Specify:	6d	
. Food	and housekeeping supplies	7	\$650.00
. Child	lcare and children's education costs	8	
. Cloth	ning, laundry, and dry cleaning	9	\$125.00
0. Pers	onal care products and services	10	\$120.00
1. Medi	cal and dental expenses	11	\$225.00
	<b>sportation.</b> Include gas, maintenance, bus or train Do not include car payments.	12	\$525.00
	rtainment, clubs, recreation, newspapers, azines, and books	13	\$125.00
4. Char	itable contributions and religious donations	14	\$560.00
5. Insui Do no	rance. ot include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a	\$108.00
15b.	Health insurance	15b	
15c.	Vehicle insurance	15c	\$688.00
15d.	Other insurance. Specify:	15d.	
6. Taxe	, , ,	16	
7. Insta	Ilment or lease payments:		
17a.	Car payments for Vehicle 1	17a	
17b.	Car payments for Vehicle 2	17b	
17c.	Other. Specify: Pet Care	17c	\$50.00
17d.	Other. Specify: Tolls / H's cc	17d	\$275.00
	payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
9. Othe Spec	r payments you make to support others who do not live with you. ify:	19	

Deb	tor 1	Melinda D. Henderson	Case number (if known)	16-30622-13
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Othe	r. Specify: See continuation sheet	21. +_	\$352.83
22.	Calcu	ulate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$6,016.83
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2. 22b	_
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$6,016.83
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$7,655.41
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b> _	\$6,016.83
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$1,638.58
24.	Do y	ou expect an increase or decrease in your expenses within the year after y	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do yo ent to increase or decrease because of a modification to the terms of your mort	. ,	
	<b>7</b>	No		
		Yes. Explain here: None.		

Debtor 1	Melinda D. Henderson	Case number (if known	16-30622-13
21. Other.	Specify:		
Micro	soft		\$15.00
H's IR	S payment		\$192.83
H's cr	redit card		\$40.00
H's lo	an Citifinancial		\$50.00
oldest	t son help with sickle cell medical expenses	_	\$55.00
		Total:	\$352.83

Fill in this information to identify your case:						
Debtor 1	Melinda First Name	<b>D.</b> Middle Name	Henderson Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF TEXAS			
Case number (if known)	16-30622-13					

✓ Check if this is an amended filing

### Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

SCI	ledules after you file your original forms, you must fill out a new Summary and check the box at the top of this	page.
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$88,980.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$42,772.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$131,752.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$145,312.45
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$5,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$15,148.00
	Your total liabilities	\$165,460.45
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$7,655.41
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$6,016.83

Del	otor 1	Melinda D. Henderson	Case number (if known)16-30	0622-13	
Р	art 4:	Answer These Questions for Administrative and Statistic	ical Records		
6.	Are you	ı filing for bankruptcy under Chapters 7, 11, or 13?			
	□ No ✓ Ye	. You have nothing to report on this part of the form. Check this box and s s	ubmit this form to the court with yo	our other schedules.	
7.	What ki	ind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.				
	_	our debts are not primarily consumer debts. You have nothing to report of some to the court with your other schedules.	on this part of the form. Check this	s box and submit	
8.		om the Statement of Your Current Monthly Income: Copy your total current monthly income from ficial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.			
9.	Copy th	ne following special categories of claims from Part 4, line 6 of Schedul	e E/F:		
			Total claim		
	From P	art 4 on Schedule E/F, copy the following:			
	9a. Do	mestic support obligations. (Copy line 6a.)	\$0.0	00	
	9b. Ta	xes and certain other debts you owe the government. (Copy line 6b.)	\$5,000.0	00	
	9c. Cla	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	00_	
	9d. Stu	udent loans. (Copy line 6f.)	\$0.0	00	
		oligations arising out of a separation agreement or divorce that you did not roority claims. (Copy line 6g.)	eport as \$0.0	00	

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$5,000.00

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE:			8			
Melinda D. Henderson		e)	§	Case No.	16-30622-13	
			§			
u u	Debtor(s)		§	Chapter	13	

DECLARATION FOR ELECTRONIC FILING OF AMENDED PETITION, ORIGINAL/AMENDED BANKRUPTCY STATEMENTS AND SCHEDULES, AND/OR AMENDED MASTER MAILING LIST (MATRIX) As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company named as the debtor in this case, I HEREBY DECLARE UNDER PENALTY OF PERJURY that I have read the original statements and schedules to be filed electronically in this case and to be filed electronically in this case the voluntary petition as amended on and to be filed electronically in this case the statements and schedules as amended on and to be filed electronically in this case the master mailing list (matrix) as amended on and that the information provided therein is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after such statements, schedules, and/or amended petition or matrix have been filed electronically. I understand that a failure to file the signed original of this Declaration as to any original statments and schedules will result in the dismissal of my case and that, as to any amended petition, statement, schedule or matrix, such failure may result in the striking of the amendment(s). [Only include if petitioner is a corporation, partnership or limited liability company] --I hereby further declare under penalty of perjury that I have been authorized to file the statements, schedules, and/or

amended petition or amended matrix on behalf of the debtor in this case.

Debtor